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07-31-02

PTO/SB/121 (10-00)

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☐ Request for Customer Number (PTO/SB/125) submitted herewith.

in the following listed application(s) or patent(s) :

Patent Number (if appropriate)	Application Number	Patent Date (if appropriate)	U.S. Filing Date
	10/055,870		01/21/2002
<div>RECEIVED AUG 07 2002 GROUP 3600</div>			

Typed or Printed Name	Stephen T. Sullivan	(check one) <input type="checkbox"/> Applicant or Patentee <input type="checkbox"/> Assignee of record of the entire Interest. Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> Attorney or agent of record 32,444 (Reg. No.)
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Address of signer: SULLIVAN LAW GROUP 5060 North 40th Street, Suite 120 Phoenix, AZ 85018		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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